

REVIEWS

AN ATLAS OF REGIONAL DERMATOLOGY. By G. H. Percival, M.D., Ph.D., F.R.C.P.(Ed.), and T. C. Dodds, F.I.M.L.T., F.I.B.P. (Pp. viii + 264; figs. 475. 100s.) Edinburgh and London: E. & S. Livingstone, 1955.

THIS atlas will be generally welcomed as providing a comprehensive collection of colour photographs of skin diseases at a cost which, if not exactly low, is probably as low as it could be made to-day. The authors have chosen to group the photographs regionally so that one can easily compare two separate diseases affecting the same area. This will be of great help to students, and though at first it might be thought to have unfortunate disadvantages yet, since this is an atlas, the scheme works well. The slight disadvantage of duplication of certain photographs is, if anything, probably an advantage to junior students.

The quality of photography and reproduction is exceedingly high—admittedly there are a few “duds,” for example, figs. 35, 147, 162; but some of the photographs are outstandingly good, for example, figs. 10 to 13, 27, 42, 65, 164, 176, 247, and 344. The reviewer does feel, however, that quite a few of the photographs are superfluous, for example, figs. 32 to 35 (two could be omitted), figs. 44 to 45 (one could be omitted), figs. 91 to 95 (two or three could be omitted).

If one is to criticise this atlas then the main criticism will fall on the text matter. This is short and dogmatic and open to misunderstanding by junior students. The statements made in the captions are frequently of opinions held only by Professor Percival and the Edinburgh School of Dermatology, yet no indication is given anywhere as to what is solely Professor Percival's opinion and what is generally accepted teaching. There are no references at all to other work. Since the majority of the photographs in the atlas are of common conditions the reviewer presumes that the atlas is primarily for the use of junior students. It is certainly going to be extremely difficult—and rather trying—for orthodox dermatologists in other teaching centres to explain to their student class that in a great many cases Professor Percival's opinions cannot be accepted. The greatest confusion occurs in the section on the eczema-dermatitis group of skin diseases. The terms “seborrhœic” and “nummular” are not used, instead there are “flexural infective” and “post-traumatic infective” eczemas. Indeed, “nummular eczema” does not appear in the index. It would appear too that varicose eczema (hypostatic eczema) is a variety of “post-traumatic infective eczema,” but no explanation is given of this change in terminology.

It would appear, from some of the statements made in the captions, that if the pemphigus blister is subepidermal then the diagnosis is that of dermatitis herpetiformis, the insinuation being that before one calls an eruption pemphigus one must have an intra-epidermal blister. This is certainly not current teaching. One caption suggests that lichenification occurs only with Besnier's prurigo—but this may be “loose” writing.

The reviewer deeply regrets having to criticise a collection of photographs of this quality because of the unfortunate terminology and opinions expressed in the small text-matter available, but the junior student who learns his dermatology from this atlas will be hopelessly confused by the teaching which he receives in our medical school (and indeed in most other schools).

Molluscum sebaceum is not mentioned, though fig. 126, labelled “squamous cell carcinoma,” looks extremely like it.

One must congratulate the publishers on the excellent reproduction. The quality of paper and binding are of the high standard which one has come to expect from Messrs. E. & S. Livingstone.

J. M. B.

BEDSIDE DIAGNOSIS. By Charles Seward, M.D., F.R.C.P.(Ed.). 18s. 6d. Edinburgh and London: E. & S. Livingstone, 1955.

THIS is a delightful book, easy to read and packed full of sound clinical teaching. For those who do not know Dr. Seward's book, it consists of twenty-two chapters devoted to the common presenting symptoms of disease. Discussion of the physiological and pathological factors giving rise to the complaint is followed by a careful and detailed exposition of its possible causes. A helpful

section on the diagnostic approach to each symptom is included in the chapter, and this will be found of value in sizing up the relative points of importance in reaching a conclusion.

This method of approach to clinical medicine is, in the reviewer's opinion, of considerable importance, and medical students will find it a most valuable aid in their clinical studies. Not only will students be helped, but every doctor who practises the difficult art of diagnosis will find his knowledge widened and senses sharpened.

This book can therefore be highly recommended to doctors and medical students alike as a stimulating and practical guide to bedside diagnosis, and Dr. Seward is to be congratulated on writing what deserves to be a medical best seller.

D. A. D. M.

PROFESSIONAL NEGLIGENCE. By J. P. Eddy, Q.C. (Pp. xii + 140 + vi. 13s. 6d.) London : Stevens & Sons, 1955.

IMPERITIA culpæ adnumeratur—Unskillfulness is counted as negligence. So said Justinian the law-giver in 565 A.D., and he went on to cite as an example of professional negligence the case of a physician carelessly giving the wrong medicine. The negligent surgeon is even older : the code of Hammurabi of 2084 B.C. says : "If a doctor has opened a man's tumour with a metal knife and destroyed the man's eye, his hands shall be cut off." And throughout the history of our own common law the negligent doctor has appeared not infrequently as a defendant, though it is only in the past five or six years that actions against medical men have become increasingly common. The exact numbers are difficult to ascertain, but some indication can be gathered from statistics of the amounts paid out by hospital authorities in the way of damages. In 1948 the figure was £7,500 : by 1953 it had risen to £153,000.

No one who is acquainted with the true facts imagines for a moment that doctors are becoming more careless : indeed, one has only to chat with an aged practitioner who can describe the conditions of fifty years ago to realise that standards of exactness and thoroughness have risen throughout the present century and continue to rise. The real explanation is that the present situation is partly a by-product of the nationalisation of the medical service and partly the result of the introduction in Great Britain of the Legal Aid system. Instead of the surgeon and physician of the old days whose work in hospitals was voluntary or rewarded merely with a token honorarium, we now have hospital officers who are employees of the hospital authorities. It is no wonder that the attitude of the public towards practitioners has changed, and the slightest suspicion of negligence suggests an action against the hospital in which the damages will be paid out of the limitless coffers of the State. Add to this the fact that Legal Aid comes to the assistance of the potential litigant and we can at once account for the spectacular increase in this type of action.

The limit of a doctor's duty is clear. He does not undertake to cure you, any more than a lawyer undertakes that he will win your case or a clergyman guarantees to procure your salvation. He is expected to bring to the exercise of his craft a reasonable degree of care and skill, but such have been the advances of medical science that what is a reasonable degree becomes a higher standard each year.

The book under review does not deal exclusively with doctors but with professional men generally. Lawyers, bankers, architects, surveyors and many other professional men are under a similar liability and are targets for the same type of action. Nor does the book pretend to be a text-book on the subject. It is a reprint of the Travers Memorial Lectures which Mr. J. P. Eddy, Q.C., delivered at the City of London College early in 1955, and in 140 pages the author has not been able to do more than sketch an outline of the position. That part which deals with the liability of doctors, dentists and hospitals is the most interesting because here the author has had a wealth of modern cases on which to draw for examples. In addition to noting the increased incidence of actions against medical men and medical bodies, he also draws attention to what is undoubtedly a most significant trend, and that is the increased reliance on the maxim *res ipsa loquitur* in actions arising out of medical treatment. This maxim is, in effect, a presumption that because something has gone wrong someone has been careless. It is, perhaps, a tribute to the advances of medical science and the perfecting of techniques that the patient has come to expect complete satisfaction